

# “REOPEN”



## Agency Plan

*Follow up to the 2019-2020 COVID-19 Response*

**Safer.Stronger.Together.**

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Commissioner

Department of Mental Health and Addiction Services

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## **Guiding Principles for Resuming On-site Operations at DMHAS (Mirroring Reopen CT) \***

1. <b>Safety First</b> - We will resume operations at DMHAS safely and securely with proactive guidance that safeguards the health of our employees and stakeholders, continues physical distancing and provides clear safeguard rules
2. <b>Science Driven</b> - Our strategy relies on scientifically validated public health interventions. Staff screening, testing of direct care staff and public health guidance will be deployed to mitigate against infection in the workplace.
3. <b>Prepared</b> -We have procured and will continue to distribute personal protective equipment to all staff working at DMHAS for use in client care and administrative areas.
4. <b>Choice</b> - DMHAS has been empowered to craft a plan that meets the needs of the department.
5. <b>Dynamic</b> - Tools will be identified to inform an adaptive plan that can be nimble scaled or rolled back rapidly based on real-time critical health metrics.

- *Outline and enclosed materials, in part, reproduced from “REOPEN Connecticut”-Governor Ned Lamont; Sector Rules for May 20<sup>th</sup> reopen. May 8, 2020.*
- *Note that on June 5, 2020 the Governor changed the date for Phase II from June 20 to June 17*
- *On June 9, 2020 additional guidance was released by OPM*

### **Reopen Planning and Priorities**

Throughout the COVID-19 crisis, DMHAS continued to offer clinical services with modifications to how those services were delivered. Business operations were also modified with many office functions performed via telework. A third of the DMHAS workforce has been approved for use of technology for telework. The remaining two-thirds of the workforce, primarily direct service providers, information technology and safety services, remained on-site at DMHAS State Operated facilities.

The DMHAS Reopen plan addresses the thoughtful balance of the resumption of on-site administrative job functions and clinical services performed in DMHAS facilities and in the community (versus by telehealth) and adherence to Guidelines issued by the Governor’s Office,

the CDC, CT Department of Public Health, Office of Policy Management and Department of Administrative Services to protect the welfare of staff and for whom services are provided.

Returning to pre-COVID business operations will be based on the critical work of the Agency, the continued ability to perform necessary functions remotely, the need for increased organizational performance capacity, statutory/regulatory deadlines along with the short- and long-term goals of the organization.

### **How We Will Open DMHAS Safely**

DMHAS is following Guidelines from the Centers for Disease Prevention and Control (CDC), The Governor’s Office and the Connecticut Department of Public Health.

Two factors are being considered:

WHAT job functions can restart onsite and when

HOW divisions/employees must operate as business on-site is resumed

WHAT:

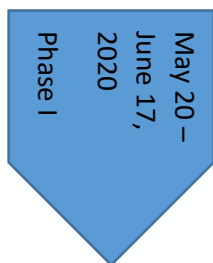
- We know that some job functions without proper precautions put employees and stakeholders at greater risk of transmission than other job functions (i.e. frontline/direct care work and in-person program monitoring).
- Agency Mission and Vision, Continuation of Operation Plans, Agency legal responsibilities, applicable labor agreements and the Employee Level Designations were all considered in the evolution of DMHAS’ planning.
- DMHAS has prioritized restarting office based on-site job functions that pose a lower risk of transmission.
- Transmission risk is defined as contact intensity and modification potential of our business
  - Contact intensity considers contact proximity, contact length and number of contacts.
  - Modification potential considers our ability to socially distance and sanitize in accordance with regulations

HOW:

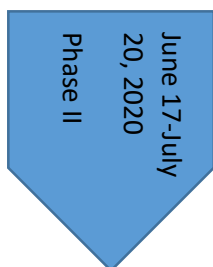
- Leadership will provide operational guidance on how to resume on-site operations while ensuring the safety of employees and stakeholders.
- Guidance will include social distancing and hygiene, as well as the use of masks- for employees and consumers/stakeholders.
- The level of guidance will gradually become less restrictive over time as our confidence in the ability to monitor and contain the disease increases.

## WHAT: Job Functions Resume Over Time

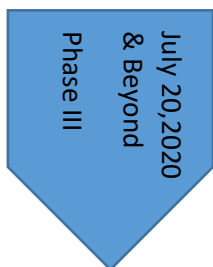
DMHAS will resume on-site business operations with a gradual approach



- DMHAS Coordinating Reopen Efforts with Health & Human Services Agencies
- Telework continues for majority of staff
- Staff level designation changes with 2 weeks’ notice
- Assumes screening, use of masks and maintaining 6 feet of social distancing.
- Use MS TEAMS even for on-site meetings.
- NO visitors
- NO on-site meetings of 3 or more people.



- Telework extension through July 20<sup>th</sup>.
- Up to 50% on-site capacity (per the Governor’s CT REOPEN Phase I).
- Outdoor socially distanced visitation at inpatient facilities with PPE
- NO on-site meetings of more than 5 people
- Assumes screening, use of masks and maintaining 6 feet of social distancing.
- Preferably use TEAMS even for on-site meetings.
- Staff level designation changes with 2 weeks’ notice. Managers should look for opportunities to stagger schedules and/or modify work spaces with ongoing teleworking.
- Commissioner’s Executive Group and Incident Command Team (ICT) will update guidance as needed.



- Permit Telework where aspects of the job allow.
- Maintain capacity as directed by OPM/Governor’s Office in CT REOPEN Guidance.
- Review visitation and gathering sizes
- Assumes screening, use of masks and maintaining 6 feet of social distancing.
- Preferably use TEAMS even for on-site meetings.
- Staff level designation changes with 2 weeks’ notice.

## HOW: Safeguards

As we resume full business operations on-site at our facilities throughout DMHAS, we will do so with strict controls on operations and societal interaction. This will include among other measures:

- Occupancy LIMIT of 50% capacity until further notice. This does not mean that 50% of staff will return to work offices on July 20 or August 20. Return to work on-site will be gradual and staff will work with Senior Managers/supervisors to ensure social distancing can be maintained.
- In buildings operated by the State Department of Administrative Services (DAS), Hours of Operations will be determined by existing arrangements. Hours of operation in leased buildings will be determined by applicable lease agreements.
- Building access will be limited to ‘Main Entrances’ only. All other access points will be secured in order to maintain control over occupancy.
- Staff presenting at DMHAS Offices throughout the State must sign in and out upon entry and exit.
- Staff screening upon entry to all DMHAS facilities
- Testing of certain direct care staff, as identified by the State Office of Policy and Management (OPM), Office of Labor Relations (OLR) and the State Department of Public Health. All other staff are encouraged to use local testing resources of their choice.
- Strict cleaning and disinfection protocols in all areas. Cleaning products and/or disinfectant wipes (with instructions for use) will be available near commonly used surfaces (e.g. break rooms, shared equipment, shared tables). Disinfect frequently used items and surfaces.
- The cleaning crew and contracted cleaning companies at DMHAS facilities will use CDC approved disinfectant cleaners and increase frequency of cleaning.
- Employees will wash their hands routinely using soap and water for at least 20 seconds.
- Hand sanitizers will be available at entrance points and common areas. Employees who are not feeling well should not be on site.
- Use of telework: those who can work from home should coordinate telework with their supervisor.
- Those in high-risk groups (comorbidities) and over the age of 65 should continue to stay safe and stay home
- Facemasks (surgical or cloth) should continue to be worn when entering DMHAS facilities and in public spaces at all times (e.g. hallways, bathrooms, elevators, cubes). Masks should cover nose and mouth completely. If an employee is working alone or in a segregated space, employees may remove masks. However, workers shall wear a mask or face covering from the time they enter the building until the time they are leaving their work station and moving around common areas. Continuous wearing of masks is not required in outdoor workspaces where employees do not come within 6 feet of other employees. Facemasks must be worn when in a vehicle with another individual

and when using drive-through services. As previously stated, employees have the option to wear their own mask, provided it meets the [CDC guidelines](#). Facemasks must also be worn by employees when conducting business at the worksites of other entities. For more information concerning masks, refer to the [CDC guidance](#). Employees providing direct patient care will follow DMHAS protocol, consistent with CDC guidance on use of PPE.

- [Gloves](#) will be provided to employees who require them to perform certain job functions, such as direct patient care, handling mail, custodial work, certain trades, and grounds keeping. For the vast majority of employees, gloves are not recommended for general protective use. Similarly, other types of Personal Protective Equipment will be provided by the Agency only to employees who require them to perform their job functions and who are trained in using them. For more information concerning gloves and PPE, refer to the CDC guidance and applicable OSHA standards.
- [Social distancing](#) is a simple and very effective way to prevent the potential spread of infection. In practice this means: Staying six feet away from others as a normal practice, eliminating physical contact with others such as handshakes or embracing coworkers, visitors, or friends. Avoiding touching surfaces that are touched by others as much as possible and avoiding anyone who appears to be sick or is coughing or sneezing. Refer to the DMHAS’ Operational Plan for workplace solutions being employed to accommodate social distancing (e.g. flexible schedules, limiting meeting size). When social distancing is not possible such as situations where direct care is being provided to a patient, employees will follow DMHAS protocol and CDC guidance for use of PPE.
- [Employee vigilance](#) is essential (e.g. if a co-worker is using the break area and you are not able to socially distance, stagger your use of the room). Be considerate of other employees. Wipe down common spaces/equipment after you use them.

Safeguards will loosen over time. We expect this to occur over the coming months, based on DPH guidance.

As mentioned DMHAS will follow guidance from the CDC, CT Governor’s office, CT DPH and DAS. We plan to allow for learning, adaptation of behaviors, and ultimately the achievement of improved health metrics. If the health metrics deteriorate or there is a resurgence of the virus, the State, and DMHAS, may choose to revert back to stricter safeguards.

### **Federal, State and Other Resources**

DMHAS activated its Incident Command Team (ICT) Structure to coordinate the agency’s COVID-19 response efforts. This structure continues to handle all aspects of the pandemic response as well as the Agency Reopen efforts. The DMHAS Chief Medical Officer, in coordination with the facility medical directors’ consults regularly with the State Department of Public Health on developing and updating policies and protocols to ensure staff and client safety. Furthermore, the Agency Medical Director is in regular communication with national

and local Infectious Disease and other Clinical experts and has developed numerous guidance documents to enhance client care and staff safety. Such guidance and resources are available on the [DMHAS COVID-19 webpage](#) and include: Protocol for Quarantine and Isolation, Frequently Asked Questions, Uniform Screening Tool for staff and patients and more. In addition, the agency has developed multiple trainings available on the [Learning Management System](#) to provide staff education on the ever evolving novel pandemic.

Additional Resources:

Federal and Occupational Health Resources:

Center for Disease Control and Prevention (COVID Response)

<http://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

Center for Disease Control and Prevention (Reopen America Guidance for cleaning & Disinfecting)

[https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/Reopening\\_America\\_Guidance.pdf](https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/Reopening_America_Guidance.pdf)

Occupational Safety and Health Administration

<https://www.osha.gov/Publications/OSHA3990.pdf>

State of Connecticut Resources:

Governor’s Coronavirus Disease 2019 Website

<https://portal.ct.gov/coronavirus>

<https://reopen.ct.gov/index.html>

<https://portal.ct.gov/Coronavirus/Information-For/State-Employees>

Personal Protective Equipment Resources:

[https://portal.ct.gov/-/media/Coronavirus/20200324-Update\\_PPE\\_Testing\\_Info.pdf](https://portal.ct.gov/-/media/Coronavirus/20200324-Update_PPE_Testing_Info.pdf)

COVID related Personnel Situations Resources:

<https://portal.ct.gov/-/media/DAS/Statewide-HR/A---Z-Listing-Task-PDFs/COVID-19-PERSONNEL-SITUATIONS-IN-STATE-AGENCIES.pdf>

Childcare Resources:

<https://www.ctoec.org/covid-19/>

Guidance for Staff when using public transport:

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/using-transportation.html>

CDC Guidance on Cleaning and Disinfecting on Transport Vehicles:



<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html>

CDC Signage and other Print Resources:

<https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc>

### **Employee Responsibilities - PROTECT ONE ANOTHER**

You cannot assume every employee has been tested or that someone without symptoms is negative. Please act responsibly.

Daily Health Check- monitor for your own symptoms including cough, shortness of breath, or any two of the following symptoms:

- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Persistent sneezing

Please stay home if you are sick

- Inform HR and your supervisor if you are sick and follow state testing and contact tracing protocols
- Follow return to work policy

Keep informed

- Read Commissioner’s bulletins.
- Refer to the [DMHAS Coronavirus website](#)

Practice Good Hygiene-Must practice ALL steps

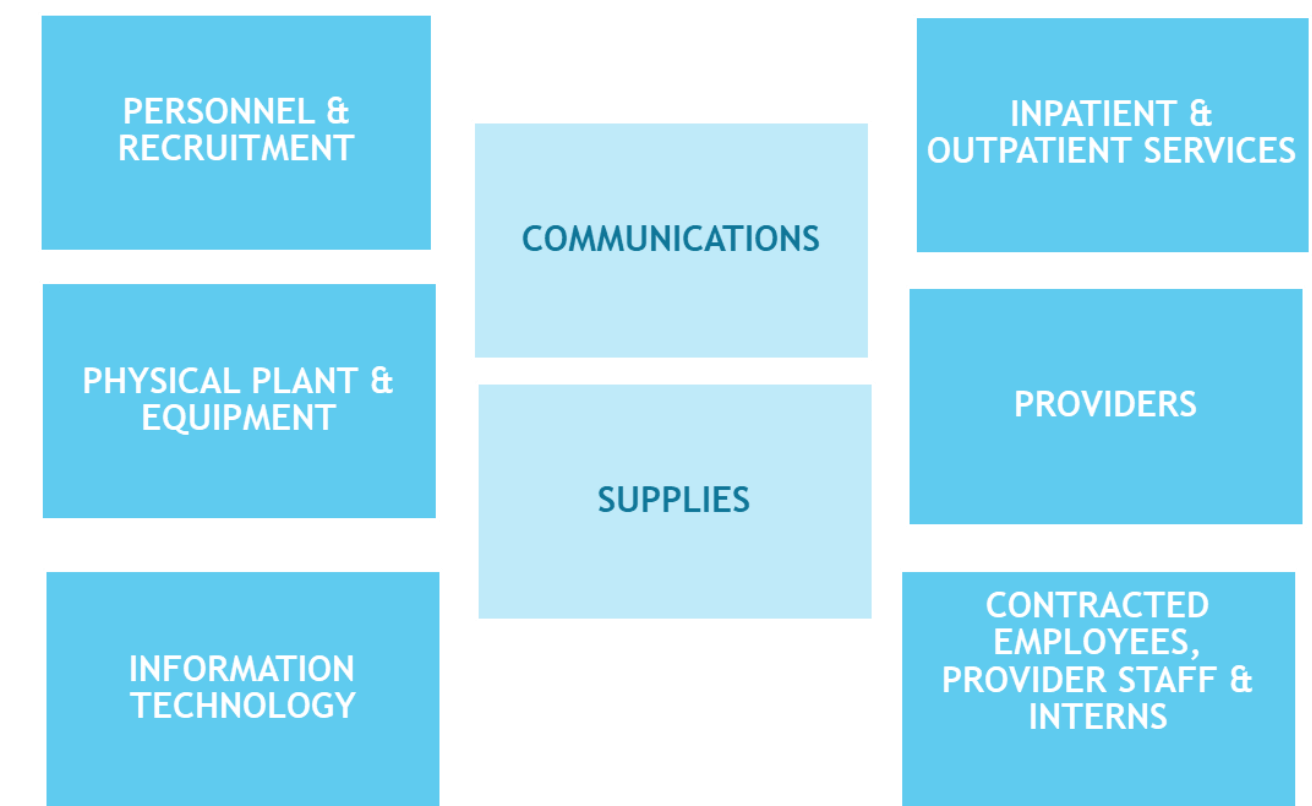
- Wash hands often and for 20 seconds with soap and water (at least every few hours) especially after touching frequently used items or surfaces
- Avoid touching your face
- Sneeze or cough into a tissue, or the inside of your elbow
- Disinfect frequently used items and surfaces as much as possible
- Wear your mask\*

- Social distance while in the presence of others
- Carry all personal belongings directly to your workspace

*\*If worn properly and with the right fit, surgical masks are effective in blocking 99% of the respiratory droplets expelled by people with coronavirus or influenza viruses. The material of a double-layered cotton mask (the kind people make at home) can block emission, as well. And the SARS-CoV-2 virus does not last long on cloth; viral counts drop 99% in three hours.*

### **DMHAS “Reopen” Operational Considerations**

As DMHAS “reopens”, the most important consideration is the health and safety of employees and clients. Operational considerations ensure DMHAS offices and facilities meet the rules and guidelines established by the Department of Administrative Services (DAS) and the Office of Policy and Management for state agencies full resumption.



#### **Personnel & Recruitment**

- Modifications to new employee orientation include multiple small groups sessions a week to allow for social distancing. Some trainings are completed online.

- Staffing contingency plans in place for DMHAS facilities to maintain capacity to respond to exposures. Recruitment of clinical staff to maintain capacity and custodial staff for increased cleaning frequency.
- A combination of telework, onsite work with staggering schedules is in place. Considerations for modification of work schedule include but are not limited to these support factors: staff with child care and care giver needs, staff who are immunosuppressed/vulnerable. Details are contained in the [Projected Agency Reopening Planning Spreadsheet](#).
- DMHAS will incorporate telework into the Agency’s Re-open plan to maximize social distancing. The Agency will incorporate staggering schedules, grouping staff into teams and assess staffing patterns to support social distancing and control the number of staff reporting to the facilities and working together at any one time.
- DMHAS recognizes the importance for staff to focus on their own well-being.
- The State [Employee Assistance Program](#) (EAP) is free and available to serve employees, family members, and members of the household with a variety of services. Solutions EAP: 1-800-526-3485
  - State of CT Coronavirus Website Mental Health Resources:  
<https://portal.ct.gov/Coronavirus/Pages/Public-Health-Resources/Mental-Health-Resources>
  - Speak to a DMHAS Chaplain at 860-999-1629 from 9am to 9pm

#### Physical Plant & Equipment

- DMHAS facilities are in state owned buildings, leased buildings and multi-tenant leased and state buildings.
  - DMHAS facilities that occupy space in buildings under the custody of DAS will consult with the designated DAS Property Manager before finalizing re-opening plans to ensure compliance with established guidelines and, for multi-tenant buildings, for coordination with the plans and schedules of other agencies.
  - DMHAS facilities that occupy space in a DAS-leased building will consult with the Statewide Leasing Property Agency before finalizing re-opening plans to ensure compliance with established guidelines and with the applicable lease agreements.
  - Landlords’ must [self-certify](#) to ensure compliance with guidelines established by the State Department for Economic Development. Property management companies are required to follow DAS Facilities Requirements for Re-opening.
- The 50% occupancy standards will gradually be adjusted in concert with statewide guidance and this document will be updated or modified accordingly.

- All persons entering a DMHAS building must wear masks or face coverings and must practice social distancing.
- Staff sharing offices will maintain appropriate social distancing if possible, otherwise, other arrangements will be put in place to provide adequate social distancing.
- Employees shall be directed to keep work areas uncluttered to aid in cleaning and disinfecting.
- Hand sanitizer and wipes will be placed at appropriate locations throughout assigned office areas/floors.

#### Supplies

- Supplies are acquired through the normal procurement process or the WEB-EOC.
- A 30-day supply of Personal Protective Equipment (PPE) will be maintained.
- Employees in the field will be provided hand sanitizer as part of their personal protective equipment.
- PPE will be added to state vehicles.

#### Communications

- Internal and external communications including memos, conference calls, internet and intranet postings.
- DMHAS website will continue to be used to post resources and guidance for employees, PNP contracted providers and other stakeholders.

#### Information Technology

- Use of Technology for continued telework is essential.
- Workplace meetings are conducted virtually using approved technology whenever possible. Where an in-person meeting is deemed absolutely necessary, the following protocols will apply:
  - At this time, in-person meetings will be limited to 33% of the normal room occupancy; and in all cases the number of persons shall be consistent with the Governor’s current Executive Order regarding the size of public gatherings.
  - Meeting rooms must accommodate a social distancing requirement of at least six feet of separation for everyone in attendance.
- Shared equipment where use cannot be avoided, have disinfectant wipes and/or hand sanitizers for employees to use to clean touch points on the equipment before and after each use.
- Equipment (i.e. iPhones) distributed to inpatient facilities for patient-family/other to support communication

#### Inpatient/Outpatient Services

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- Guidelines developed for socially distanced, scheduled visitations outdoors at DMHAS Inpatient Facilities.
- Infection control is an integral part of DMHAS facilities operations and will be enhanced throughout the reopening.
- Maintain 30-day supply of PPE at all DMHAS facilities.
- Maintain capacity to in open isolation unit/private rooms in the event that patients test COVID positive.
- Quarantine all new admissions to inpatient or residential services for 14 days.
- Maintain ability to cohort patients per CDC and DPH guidance.
- Continue telemedicine and telehealth services
- Evaluate funding level increases for certain services with high demand during the pandemic – e.g. Mobile Crisis increased hours.
- Modify services for Peer Support Centers and Social Clubs to maintain social distancing and proper hygiene.

### **Private Non Profit Providers**

- Continue with the distribution of PPE to Private Non-Profit Providers as approved by ESF-7.

### **Contracted Employees, Provider Staff and Interns**

- Ongoing evaluation of when to allow co-located PNP staff, Interns and other contracted employees back into DMHAS buildings.

## **“Reopen” Implementation Plan Tasks**

✓ Task status key: green - complete/ongoing; yellow - in progress; red - not started/on hold

<b>Task Name</b>	<b>Status</b>	<b>Notes</b>
<b>Human Resources</b>		
Utilize DAS/OPM guidance to approve staff time off needed to self-quarantine after exposure	✓	Continue to follow DAS/OPM Guidelines
Track Weekly Testing Results	✓	Ongoing at DMHAS State Operated facilities & HR
Develop staffing contingency plan once testing begins	✓	ongoing
Maintain capacity to respond to potential exposure/positive client tests in 24/7 programs	✓	ongoing
Re-evaluate Essential/Nonessential designations	✓	Continue based on facility need, virus trajectory;
In person New Employee Orientation Program	✓	Ongoing with small groups

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Task Name	Status	Notes
Resume in person CPR and CSS training	✓	Training currently online; Reevaluate in person at a later date
<b>Human Resources</b>		
Extend hours to allow for nontraditional shift work	✓	consider schedule/shift change to accommodate staff needs based on union contracts
Follow DAS/OPM guidance for staff who have child care issues due to schools being closed	✓	ongoing
Increased support for staff	✓	<ul style="list-style-type: none"> <li>State of CT Coronavirus Website Mental Health Resources: <a href="https://portal.ct.gov/Coronavirus/Pages/Public-Health-Resources/Mental-Health-Resources">https://portal.ct.gov/Coronavirus/Pages/Public-Health-Resources/Mental-Health-Resources</a></li> <li>Solutions EAP: 1-800-526-3485</li> <li>Speak to a DMHAS chaplain at 860-999-1629 from 9am to 9pm</li> </ul>
Follow OPM/DAS guidance for staff who are caring for elderly family, immunosuppressed, over 65, etc.	✓	ongoing
Continue attendance reporting and track 50% of maximum occupancy	✓	Tracking tool under development
<b>Recruitment/Hiring</b>		
Ensure adequate personnel to do screenings when staff return	✓	Continue to use light duty staff and contract staff
Utilize appropriate job class to function as screeners	✓	ongoing
Provide increased custodians/cleaning crews	✓	Emergency hires and contract staff ongoing
<b>Students/PNP Staff /Contractors</b>		
Determine need for students/PNP Staff and Contractors testing	✓	To be determined
Resume students/interns experiences	✓	Identify universities where interns are coming from Resumption of students on hold
Resume PNP embedded staff	✓	On hold
Resume use of Contractors	✓	On hold
<b>Supplies/PPE/Social Distancing</b>		
Secure 30 day supply of PPE for staff and clients at all sites	✓	ongoing
Secure PPE for visitors, contractors, students, interns, and others that may be attending meetings	✓	ongoing
Develop guidelines for community-based work	✓	ongoing

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Task Name	Status	Notes
purchase supplies (PPE) from vendors on an ongoing way	✓	Ongoing attempts to procure PPE through DAS Vendors; currently receiving PPE from WEB-EOC
Client transportation	✓	Follow CDC guidelines on Cleaning and Disinfection for Non-Emergency Transport Vehicles
Evaluate social distancing space needs	✓	DAS/OPM guidance of 6ft. social distancing
Add PPE to all state vehicles	✓	Follow CDC/DAS/OPM guidance
<b>Screening</b>		
Screening at DMHAS buildings	✓	Complete in patient care buildings currently in use, OOC still needs screening tools
<b>Physical Plant/Equipment</b>		
Conduct walk through of state buildings and leased space.	✓	75% complete
Environmental changes needed	✓	All facilities looking at semi-permanent or permanent screening spaces
Identify areas and add plexi-glass barriers to front desk areas	✓	Ongoing
<b>Reorganize physical spaces</b>		
Offices	✓	ongoing
Waiting Rooms	✓	ongoing
Address needs in leased spaces with landlord/DAS	✓	Ongoing; needs identified but not yet addressed
Add signage where needed	✓	Ongoing; landlord’s responsibility to put signage up in common areas/spaces
<b>Cleaning</b>		
Increase cleaning of environment, elevators, common areas, breakrooms, etc.	✓	Follow CDC, DAS/OPM guidance
Ensure adequate disinfecting supplies	✓	Follow CDC, DAS/OPM guidance
Add hand sanitizer stations	✓	Follow DAS/OPM guidance
Purchase Clorox 360 or other Mist cleaning machine	✓	underway
Establish cleaning protocol for state vehicles	✓	Follow CDC guidance
Look at screening spaces for long term and during winter	✓	ongoing
Review cleaning contracts	✓	ongoing
<b>Information Technology</b>		
Need phones with speaker phone capability for certain facilities (CRMHC, CMHC, RVS, WFH)	✓	Inquiry ongoing

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Task Name	Status	Notes
Protocol for cleaning of computers, phones	✓	Draft protocol under review
Assess need for additional wiring	✓	CEOs to follow-up with IT as needed
Assess need for additional computers/laptops	✓	follow-up with IT as needed
Roll out of Microsoft Teams	✓	100% complete with policy in place
Equipment needs for MS Teams	✓	ongoing
Assess need for additional conference lines	✓	follow-up with IT as needed
<b>Services</b>		
Continue telemedicine with clients to keep numbers down at outpatient clinics	✓	Continue to follow DSS Guidelines - negotiate inclusion of DMHAS job classifications that "normally" are not included in the DSS guidelines
Provide services for increased number of individuals who are unemployed, uninsured but may not meet SMI target population	✓	Track need /increase in numbers served
Assess funding due to services increase	✓	Mobile Crisis hours/services stay increased, assistance in shelters
Peer Support Centers and social clubs redesign/reimagine	✓	May be one of the last services to reopen
Offer more services “outside” in community if/when possible	✓	Under review
Differentiate between telework, telemedicine and telehealth	✓	Agency Compliance Officer putting together a list of terms
<b>Review/prioritize high risk programs/clients</b>		
Mobile Crisis, ACT, YAS, CSP, Street Psychiatry	✓	already in place
Determine next stage: by service, by volume	✓	ongoing
Consider increased or changed demand for services, given potential for increased grief, PTSD and substance use	✓	Programmatic and individual assessments
Address food insecurity, basic needs, housing insecurity	✓	Ongoing assessments of individual clients
<b>Inpatient/Residential</b>		
Modifying visitor policies	✓	Guidelines under review
Open Merritt Detox	✓	8 beds reopened 6/25
Open Merritt Rehab	✓	Additional 12 beds reopened 6/25
Maintain capacity for quarantine/isolation	✓	Follow DMHAS protocol for quarantine and isolation



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Task Name	Status	Notes
<b>Communications</b>		
Inform Staff	✓	Draft Reopen plan shared with staff 6/10/2020
Communicate/collaborate with Unions	✓	Reopen discussions with 1199 on 6/11/2020
PNP Providers	✓	Return to residential capacity and required hours, changes to methadone maintenance, support in resuming services- provider by provider assessment
Identify additional stakeholders and notify them as necessary	✓	ongoing
Update legislative stakeholders	✓	ongoing
Facility specific information- Weekly	✓	ongoing
General Updates- as needed	✓	ongoing
Establish staff contact/process for question	✓	Supervisor/manager chain of command
Develop FAQ based on questions	✓	Has not been implemented
Post FAQ	✓	Work in progress
Update FAQ- as needed	✓	Work in progress
Ongoing Commissioner communication to State Board on resumption of in-office services	✓	ongoing
Ongoing Commissioner memos to providers	✓	ongoing
Press release related to resumption of in-office services	✓	Evaluating need